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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	art 1: Identify Yourself						
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's	Jeanette First name	First name				
	license or passport).	Middle name	Middle name				
Bring your picture		Castro					
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years	Jeanette Johnson					
	Include your married or maiden names.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8798					

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Debtor 1 **Jeanette Castro**

Document Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	167 E. Palatine Road #J	If Debtor 2 lives at a different address:			
		Palatine, IL 60067 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook				
		County	County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 **Jeanette Castro**

Case number (if known)

Par	Tell the Court About	our E	Bankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are				f each, see <i>Notice Required by</i> age 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bar e box.	nkruptcy		
	choosing to file under	■ Chapter 7							
		□ Chapter 11							
			Chapter 12						
			Chapter 13						
3.	How you will pay the fee		about how yo	u may pay. Typic attorney is submi	ally, if you are paying the fee yo	with the clerk's office in your local court for murself, you may pay with cash, cashier's check alf, your attorney may pay with a credit card or	k, or money		
					Ilments. If you choose this optio (Official Form 103A).	n, sign and attach the Application for Individua	als to Pay		
			I request tha	t my fee be waiv	'ed (You may request this option	only if you are filing for Chapter 7. By law, a ju			
			applies to you	ır family size and	you are unable to pay the fee in	ur income is less than 150% of the official pover installments). If you choose this option, you mial Form 103B) and file it with your petition.			
).	Have you filed for bankruptcy within the	■ N							
	last 8 years?	□ Ye			140				
			District		When	Case number			
			District District		When When	Case number Case number			
			DISTRICT		when	Case number			
10.	Are any bankruptcy	■ N	0						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	□ Ye	es.						
	affiliate?		Debtor			Relationship to you			
			District	-	When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	□ N	o. Go to l	ne 12.					
	residence:	■ Ye	es. Has yo	ur landlord obtair	ned an eviction judgment against	t you and do you want to stay in your residence	e?		
				No. Go to line 12	2.				
				Yes. Fill out <i>Initio</i> bankruptcy petiti		ludgment Against You (Form 101A) and file it v	with this		

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Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

Debtor 1

Jeanette Castro

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Debtor 1 Jeanette Castro

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Par	Answer These Questi	ons for Re	oorting Purposes						
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
			□ No. Go to line 16b.						
			Yes. Go to line 17.						
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			□ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you	u owe that are not consumer debts or bus	iness debts				
17.	Are you filing under Chapter 7?	□ No.	am not filing under Chap	ter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and			7. Do you estimate that after any exempt parallable to distribute to unsecured credit	property is excluded and administrative expenses tors?				
	administrative expenses		No						
	are paid that funds will be available for distribution to unsecured		☐Yes						
	distribution to unsecured creditors?								
18.	How many Creditors do	1 -49		1 ,000-5,000	□ 25,001-50,000				
	you estimate that you owe?	□ 50-99		<u> </u>	<u> </u>				
		☐ 100-199 ☐ 202-202		☐ 10,001-25,000	☐ More than100,000				
		200-99	9						
19.	How much do you	\$ 0 - \$50,000		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?	□ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion				
			01 - \$500,000 01 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$50,000		□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?	\$50,001 - \$100,000		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion				
	to be:		01 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion				
		\$500,00	01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion				
Par	7: Sign Below								
For	you	I have exa	mined this petition, and I d	declare under penalty of perjury that the ir	nformation provided is true and correct.				
				er 7, I am aware that I may proceed, if eligi e relief available under each chapter, and	ible, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.				
				d not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b)					
		I request re	elief in accordance with th	e chapter of title 11, United States Code,	specified in this petition.				
					ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,				
			tte Castro	Cianatura of D	obtor 2				
		Jeanette Signature		Signature of De	SUIUI Z				
		Executed	on March 15, 2017	Executed on					
MM / DD / YYYY MM / DD / YYYY									

Debtor 1 Jeanette Castro

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ James A. Young	Date	March 15, 2017
Signature of Attorney for Debtor	_	MM / DD / YYYY
James A. Young		
Printed name		
James A. Young Law		
Firm name		
85 Market Street		
Elgin, IL 60123		
Number, Street, City, State & ZIP Code		
Contact phone 847-793-1031	Email address	sarai@jamesyounglaw.com
6217342		
Bar number & State		

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Document Page 8 of 55 Fill in this information to identify your case: **Jeanette Castro** First Name Middle Name Last Name

Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106Sum

Debtor 1

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filling amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 6,299.63 1c. Copy line 63, Total of all property on Schedule A/B..... 6,299.63 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 0.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 89,005.44 Your total liabilities 89.005.44 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 2,330.68 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 2,931.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Jeanette Castro

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Document Page 10 of 55 Fill in this information to identify your case and this filing: Debtor 1 **Jeanette Castro** First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. \square Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Ford 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Focus** Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2003 Debtor 2 only Current value of the Current value of the 174.000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information At least one of the debtors and another **Fair Condition** \$169.00 \$169.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$169.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

Debtor 1	Case 17-		Doc 1	Filed 03/15/17 Document	Entered 03/15/17 16 Page 11 of 55 Case number	:11:45 er (if known)	Desc Main	3/15/17 4:09PM
■ Yes.	Describe							
		Misc. H chairs,		Goods - beds, dress	ers, sheets, pillows, tables,			\$785.00
□ No	les: Televisions a			stereo, and digital equi lia players, games	pment; computers, printers, scanno	ers; music c	collections; electror	nic devices
		Misc. E	lectronics	- TV's, DVD Player,	Stereo, Ipad, Laptop, Printer			\$902.00
Example No			paintings, prii prabilia, collec		oks, pictures, or other art objects;	stamp, coin	, or baseball card o	collections;
		Misc. A	rt Prints ar	nd Books				\$265.00
Example No	nent for sports a les: Sports, photo musical instr Describe	ographic, ex uments	xercise, and c	other hobby equipment;	bicycles, pool tables, golf clubs, sk	xis; canoes	and kayaks; carpe	ntry tools; \$215.00
		IVIISC. L.	Xercise Eq	dipilient, bicycles,	i oga mat			Ψ210.00
■ No		s, shotguns	s, ammunitior	n, and related equipmer	ıt			
□ No		othes, furs,	, leather coats	s, designer wear, shoes	s, accessories			
		Misc. C	lothes & A	pparrel				\$725.00
□ No		welry, cost	ume jewelry,	engagement rings, wed	lding rings, heirloom jewelry, watch	ies, gems, (gold, silver	
		Misc. C	ostume Je	welry				\$327.00
Exam _l ■ No □ Yes.	arm animals ples: Dogs, cats, Describe			u did not already list. i	ncluding any health aids you did	I not list		
■ No	Give specific inf			a and the an eddy not;				

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	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here						
Part 4: Describe You	r Financial Assets						
	e any legal or equitable interes	t in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.				
■ No	ey you have in your wallet, in you	r home, in a safe deposit box, and on hand when you file your petiti	on				
	king, savings, or other financial a	accounts; certificates of deposit; shares in credit unions, brokerage unts with the same institution, list each.	nouses, and other similar				
■ Yes		Institution name:					
	17.1. Checking	TCF Bank Acct. # Ending: XXXX5469	\$677.32				
joint venture ■ No		orporated and unincorporated businesses, including an interes	st in an LLC, partnership, and				
☐ Yes. Give spec	Name of entity:	% of ownership:					
Negotiable instru Non-negotiable i	uments include personal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.					
■ No □ Yes. Give spec	ific information about them Issuer name:						
21. Retirement or pe Examples: Intere		s), 403(b), thrift savings accounts, or other pension or profit-sharing	plans				
Yes. List each	account separately. Type of account:	Institution name:					
	401K	Fidelity Investments Acct. # Ending: XXXX8798	\$2,124.31				
	ROTH IRA	BOFI Federal Bank Acct. # Ending: XXXX8798	\$110.00				
	unused deposits you have made	e so that you may continue service or use from a company int, public utilities (electric, gas, water), telecommunications compar	nies, or others				
☐ Yes		Institution name or individual:					
Your share of all Examples: Agree No ☐ Yes	unused deposits you have made ements with landlords, prepaid re 	nt, public utilities (electric, gas, water), telecommunications compar	nies, or others				

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Case number (if known) Document Debtor 1 Jeanette Castro Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- NO

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim.......

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Case number (if known) Document Debtor 1 **Jeanette Castro** 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2.911.63 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form

rait	List the Totals of Each Part of this Porni				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$169.00		
57.	Part 3: Total personal and household items, line 15		\$3,219.00		
58.	Part 4: Total financial assets, line 36		\$2,911.63		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$6,299.63	Copy personal property total	\$6,299.63

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$6,299.63

		Documen	t Page 15 of 55	-, -, -, -, -, -, -, -, -, -, -, -, -, -
Fill in this infor	mation to identify your	case:		
Debtor 1	Jeanette Castro			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS	
Case number (if known)				Check if this is an amended filing
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	otions are v	ou claiming?	Check one only	. even if	vour spouse is	s filina with	vou.
----	--------------------	--------------	--------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
2003 Ford Focus 174,000 miles Fair Condition	\$169.00	\$169.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1		☐ 100% of fair market value, up to any applicable statutory limit	
Misc. Household Goods - beds, dressers, sheets, pillows, tables,	\$785.00	\$785.00	735 ILCS 5/12-1001(b)
chairs, sofas Line from Schedule A/B: 6.1		☐ 100% of fair market value, up to any applicable statutory limit	
Misc. Electronics - TV's, DVD Playe Stereo, Ipad, Laptop, Printer	r, \$902.00	\$902.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1		☐ 100% of fair market value, up to any applicable statutory limit	
Misc. Art Prints and Books Line from Schedule A/B: 8.1	\$265.00	\$265.00	735 ILCS 5/12-1001(b)
Ellie IIolii ooliodale 702. GT		☐ 100% of fair market value, up to any applicable statutory limit	
Misc. Exercise Equipment, Bicycles Yoga Mat	\$215.00	\$215.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 9.1		100% of fair market value, up to any applicable statutory limit	

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Case number (if known) Document Debtor 1 Jeanette Castro

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Misc. Clothes & Apparrel Line from Schedule A/B: 11.1	\$725.00		\$725.00	735 ILCS 5/12-1001(a)
	Line IIIIII Schedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit	
	Misc. Costume Jewelry Line from Schedule A/B: 12.1	\$327.00		\$327.00	735 ILCS 5/12-1001(b)
	Line nom Schedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit	
	Checking: TCF Bank Acct. # Ending: XXXX5469	\$677.32		\$677.32	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.1	<u> </u>			100% of fair market value, up to any applicable statutory limit	
	401K: Fidelity Investments Acct. # Ending: XXXX8798	\$2,124.31		\$2,124.31	735 ILCS 5/12-1006
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	ROTH IRA: BOFI Federal Bank Acct. # Ending: XXXX8798	\$110.00		\$110.00	735 ILCS 5/12-1006
	Line from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 No	3 years after that for ca	ises fi	,	,
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ulifi T	,z to days before you filed this case	rf.

No

Yes

Fill in this infor	mation to identify your	case:		
Debtor 1	Jeanette Castro			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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Document Page 18 of 55 Fill in this information to identify your case: Debtor 1 **Jeanette Castro** First Name Middle Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 XXXX \$793.00 **Best Buy** Last 4 digits of account number Nonpriority Creditor's Name **PO BOX 6497** 10/2012 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Cards

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Case number (if know)

4.2	Chase	Last 4 digits of account number	XXXX	\$18,508.00	
	Nonpriority Creditor's Name PO BOX 15298	When was the debt incurred?	06/2004		
	Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa	ration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Credit Card	ls		
4.3	Citibank	Last 4 digits of account number	XXXX	\$908.79	
	Nonpriority Creditor's Name c/o Midland Credit Management PO BOX 2129		05/2014		
	Warren, MI 48090 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did no to offset? report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Lawsuit #1	5 M3 447		
4.4	Citibank	Last 4 digits of account number	XXXX	\$3,337.00	
	Nonpriority Creditor's Name c/o Midland Funding 2365 Northside Dr. Suite 300	When was the debt incurred?	06/2016		
	San Diego, CA 92123 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ Disputed				
	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other. Specify Credti Card	ls		

Debtor 1 Jeanette Castro

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4.5	James G. Loeser, DDS, MD, PC	Last 4 digits of account number	0556	\$1,034.99
	Nonpriority Creditor's Name 1580 N. Northwest Highway #300 Park Ridge, IL 60068	When was the debt incurred?	06/2012 - 10/2012	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.6	James G. Loeser, DDS, MD, PC	Last 4 digits of account number	0556	\$834.99
	Nonpriority Creditor's Name 1580 N. Northwest Highway #300 Park Ridge, IL 60068	When was the debt incurred?	06/2012 - 03/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Medical		
4.7	Kohls	Last 4 digits of account number	XXXX	\$262.62
	Nonpriority Creditor's Name c/o Credit Control LLC 5757 Phantom Dr, Suite 330	When was the debt incurred?	12/2012	
	Hazelwood, MO 63042 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	k if this claim is for a community		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	ls	

Debtor 1 Jeanette Castro

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Debtor	1 Jeanette Castro		Case number (if know)	
4.8	Northwest Community Hospital Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$403.00
	c/o Miramed Revenue Group 991 Oak Creek Dr. Lombard, IL 60148	When was the debt incurred?	09/2013	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical		
4.9	Northwest Community Hospital Nonpriority Creditor's Name	Last 4 digits of account number	2134	\$682.36
	25709 Network Place Chicago, IL 60673	When was the debt incurred?	06/2012	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Medical		
4.1	Northwest Community Hospital	Last 4 digits of account number	7633	\$539.83
	Nonpriority Creditor's Name	When was the debt incurred?	2012-2013	
	c/o Harris & Harris, LTD 111 W Jackson Blvd, Suite 400 Chicago, IL 60604			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	-		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another ☐ Disputed ☐ Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other Specify Medical		

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Nonpriority Creditor's Name c/o Medical Recovery Specialists	Last 4 digits of account number When was the debt incurred?	02/2013	\$835.59
2250 E. Devon Ave, Suite 352 Des Plaines, IL 60018	when was the dest mounted.	02/2013	
Number Street City State Zlp Code Who incurred the debt? Check one.	is: Check all that apply		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical		
Old Navy	Last 4 digits of account number	xxxx	\$2,050.32
Nonpriority Creditor's Name PO BOX 965005 Orlando, FL 32896	When was the debt incurred?	09/2006	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	Student loans		
Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Credit Card	ds	
Oral Facial Implant Special	Last 4 digits of account number	XXXX	\$588.00
Nonpriority Creditor's Name			,
c/o Tek Collect PO BOX 1269	When was the debt incurred?	10/2013	
Columbus, OH 43216 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam	oneck all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Type of NONPRIORITY unsecured claim: ☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Medical		

Debtor 1 Jeanette Castro

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Case number (if know)

Debtor	1 Jeanette Castro	——————————————————————————————————————	Case number (if know)		
4.1 4	Orthopedic Associates, SC	Last 4 digits of account number	7405	\$106.01	
	Nonpriority Creditor's Name 415 W. Golf Rd., Suite 68 Arlington Heights, IL 60005	When was the debt incurred?	11/2013		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	□ Yes		g p.a, a c 252.0		
	Tes	Other. Specify Medical			
4.1 5	Pediatric Assoc. of Arlington Hts	Last 4 digits of account number	9742	\$350.30	
	Nonpriority Creditor's Name 880 W. Central Rd. Suite 4200 Arlington Heights, IL 60005	When was the debt incurred?	12/2013 - 03/2014		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure			
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing			
	□Yes	Other. Specify Medical			
4.1 6	Portfoliio Recovery Associates, LLC	Last 4 digits of account number	1128	\$2,050.32	
	Nonpriority Creditor's Name c/o Blatt Hasenmiller Liebker & Moo	When was the debt incurred?	11/2016		
	10 S. LaSalle Street, Suite 2200 Chicago, IL 60603	Wilder Had the addit mean ear	11/2010		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims			
	No	□ Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes	Other. Specify Lawsuit Ca	- ·		
	□ res	■ Other. Specify LawSult Ca	3C# 10 WIS 1120		

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Case number (if know)

Debtor	1 Jeanette Castro	——————————————————————————————————————	Case number (if know)			
4.1 7	Quest Diagnostics	Last 4 digits of account number	0162	\$15.43		
	Nonpriority Creditor's Name PO BOX 740397 Cincippeti OH 45374	When was the debt incurred?	08/2013			
	Cincinnati, OH 45274 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing				
	Yes	Other. Specify Medical				
4.1	Sears	Last 4 digits of account number	7885	\$3,336.56		
	Nonpriority Creditor's Name c/o Midland Credit Management 2365 Northside Dr, Suite 300	When was the debt incurred?	01/2013			
-	San Diego, CA 92108 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card				
4.1 9	Sprint	Last 4 digits of account number	0613	\$191.50		
	Nonpriority Creditor's Name c/o ERC	When was the debt incurred?	12/2015			
	PO BOX 23870 Jacksonville, FL 32241 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	_					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated☐ Disputed				
	Debtor 1 and Debtor 2 only	d alaim.				
	At least one of the debtors and another	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims				
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify Telecommunications				
	☐ Yes	Other. Specify	unications			

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4.2	Superior Air Ground Ambulance	Last 4 digits of account number	2260	\$377.55	
	Nonpriority Creditor's Name c/o Medical Recovery Specialists LL	When was the debt incurred?	02/2015		
	2250 E. Devon Ave. #352 Des Plaines, IL 60018				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.		
	At least one of the debtors and another	Student loans	u ciaiii.		
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	aration agreement of divorce that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify Medical			
4.2	Superior Ambulance Service	Last 4 digits of account number	7531	\$377.55	
	Nonpriority Creditor's Name	Mile and a second of the secon	00/2042		
	c/o DSG Collect 2250 E. Devon Ave, Suite 352	When was the debt incurred?	06/2012		
	Des Plaines, IL 60018				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	Пол			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated			
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa	aration agreement or divorce that you did not		
	Is the claim subject to offset?				
	No	Debts to pension or profit-sharing	• • • • • • • • • • • • • • • • • • • •		
	Yes	Other. Specify Ambulance	e Service		
4.2	Synchrony Bank	Last 4 digits of account number	XXXX	\$2,050.00	
	Nonpriority Creditor's Name				
	c/o Portfolio Recovery 120 Corporate Blvd	When was the debt incurred?	01/2015		
	Norfolk, VA 23502				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa			
	s the claim subject to offset? report as priority claims				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify Credit Card	ds		

Debtor 1 Jeanette Castro

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4.2	Target	Last 4 digits of account no	ımber	XXXX	\$4,107.11		
	Nonpriority Creditor's Name c/o ERC PO BOX 23870	When was the debt incurre	ed?	05/2012			
	Jacksonville, FL 32241 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the	claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY un	secure	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out o	f a sepa	aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	и сор	and the second of the second state year and the second sec			
	■ No			ng plans, and other similar debts			
	Yes	Other. Specify Credi	t Card	ds			
4.2	The Pediatric Faculty Foundation	Last 4 digits of account no	ımber	5604	\$47.62		
	Nonpriority Creditor's Name PO BOX 4051	When was the debt incurre	ed?	06/2012			
	Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the	claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY un	secure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out o report as priority claims					
	■ No	Debts to pension or prof					
	Yes	■ Other. Specify Medic					
4.2 5	VW Credit	Last 4 digits of account no	ımber	xxxx	\$19,217.00		
	Nonpriority Creditor's Name c/o AFNI PO BOX 3517	When was the debt incurre	ed?	08/2012			
	Bloomington, IL 61702 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY un					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or prof					
			ency le:	from a Voluntary Surrender of			
	Yes						

Debtor 1 Jeanette Castro

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Jeanette Castro	-	Case number (ii know)				
Wells Fargo	Last 4 digits of account number	XXXX	\$26,000.00			
Nonpriority Creditor's Name	_					
PO BOX 31557	When was the debt incurred?	10/2007				
Billings, MT 59107						
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims					
No	Debts to pension or profit-sharing	ng plans, and other similar debts				
Yes	Other. Specify Loan					

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	89,005.44
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	89,005.44

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Page 28 of 55 Document Fill in this information to identify your case: Debtor 1 **Jeanette Castro** First Name Middle Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company witl Name, Numbe	h whom you have the coer, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	1401110				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	NI				_
	Name				
	Number	Street			_
	Number	Olicot			
	0		0	710.0	_
	City		State	ZIP Code	
2.3					
	Name				_
					_
	Number	Street			
	City		State	ZIP Code	_
2.4					-
2.7	Name -				_
	Name				
	Number	Street			_
	Number	Olleet			
	0		0	710.0	_
	City		State	ZIP Code	
2.5					
	Name				
					_
	Number	Street			
	City		State	ZIP Code	_

		Document	Page 29 c	of 55	3/15/17 4:09PM
Fill in this	information to identify your o	ase:			
Debtor 1	Jeanette Castro				
D 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS		
Case num	ber			☐ Check if this	s is an
				amended fil	ing
Officia	l Form 106H				
		- h-1 - u -			
Sched	lule H: Your Code	eptors			12/15
ill it out, a our name		boxes on the left. Attach the Answer every question.	ne Additional Page to	ion. If more space is needed, copy the Addit o this page. On the top of any Additional Pagas as a codebtor.	
			·		
■ No □ Yes	、				
□ 163	•				
	hin the last 8 years, have you a, California, Idaho, Louisiana,			y? (Community property states and territories in ington, and Wisconsin.)	nclude
	Go to line 3.		Sthere are a title at Care O		
⊔ Yes	s. Did your spouse, former spou	se, or legal equivalent live w	ith you at the time?		
in line Form	2 again as a codebtor only if	that person is a guarantor	or cosigner. Make	if your spouse is filing with you. List the pe sure you have listed the creditor on Schedul 6G). Use Schedule D, Schedule E/F, or Sche	le D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZIF	² Code		Column 2: The creditor to whom you ow Check all schedules that apply:	e the debt
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	

ZIP Code

Schedule H: Your Codebtors

State

City

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	in this information to identify your ca								
Det	otor 1 Jeanette Cas	stro			_				
	otor 2				_				
Uni	ted States Bankruptcy Court for the	NORTHERN DISTRIC	T OF ILLINOIS		_				
	se number					Check if this is:			
(,					☐ An amende☐ A suppleme	J	ostpetition ch	apter
							as of the follow		.,
O	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your Inco	ome							12/15
spo	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. (t1: Describe Employment	r spouse is not filing wi	th you, do not include	inforr	natio	n about your spo	use. If more	space is nee	eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing	j spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Emplo	oyed		
	attach a separate page with information about additional		☐ Not employed			☐ Not er	☐ Not employed		
	employers.	Occupation	Buyer						
	Include part-time, seasonal, or self-employed work.	Employer's name	Whole Foods						
	Occupation may include student or homemaker, if it applies.	Employer's address	760 Waukean Rd Deerfield, IL 60015	i					
		How long employed th	nere? 3 Years						_
Par	t 2: Give Details About Mon	thly Income							
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	ou have nothing to repo	ort for	any l	ne, write \$0 in the	space. Includ	e your non-fil	ling
-	u or your non-filing spouse have mo e space, attach a separate sheet to		mbine the information fo	or all e	emplo	yers for that perso	n on the lines	below. If you	ı need
						For Debtor 1	For Debtor		
2.	List monthly gross wages, salar deductions). If not paid monthly, o			2.	\$	2,420.75	\$	N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$	0.00	+\$	N/A	

2,420.75

N/A

Calculate gross Income. Add line 2 + line 3.

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Debto	tor 1 Jeanette Castro		Case r	number (if known)			
			For	Debtor 1	For D	ebtor 2 or	
			_			iling spouse	
	Copy line 4 here	4.	\$	2,420.75	\$	N/A	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	506.29	\$	N/A	
	5b. Mandatory contributions for retirement plans	5b.	\$	81.45	\$	N/A	
	5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e. Insurance	5e.	\$	69.29	\$	N/A	
	5f. Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g. Union dues	5g.	\$	0.00	\$	N/A	
	5h. Other deductions. Specify: Emergency Fund	5h.+	· -		+ \$	N/A	
	Shoes		\$	27.88	\$	N/A	
	Short Term Liability		\$ _	24.02	\$	N/A	
	Long Term Disability		Φ	11.14	Φ	N/A	
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	730.07	\$	N/A	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,690.68	\$	N/A	
	 List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dep 	8a. 8b.	\$ \$	0.00	\$ \$	N/A N/A	
	regularly receive Include alimony, spousal support, child support, maintenance, divorc	e					
	settlement, and property settlement.	8c.	\$	640.00	\$	N/A	
	8d. Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e. Social Security	8e.	\$	0.00	\$	N/A	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance you receive, such as food stamps (benefits under the Supplement Nutrition Assistance Program) or housing subsidies. Specify:		\$	0.00	\$	N/A	
	8g. Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h. Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	640.00	\$	N/A	
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	2	2,330.68 + \$_		N/A = \$	2,330.68
	State all other regular contributions to the expenses that you list in So Include contributions from an unmarried partner, members of your househoother friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that Specify:	old, your depend	•		,	hedule J. 11. +\$	0.00
	Add the amount in the last column of line 10 to the amount in line 11. Write that amount on the Summary of Schedules and Statistical Summary capplies						2,330.68
						Combine monthly	
13.	Do you expect an increase or decrease within the year after you file th No.	is torm?					
	☐ Yes. Explain:						

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Fill	in this information to identify your case:						
Deb	Jeanette Castro		Check if this is:				
Deb	tor 2			An amended filing A supplement show	ving postpetition chapter		
(Spo	buse, if filling)			13 expenses as of			
Unit	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING	OIS	-	MM / DD / YYYY			
	e number						
O ₁	fficial Form 106J						
	chedule J: Your Expenses				12/15		
Be info	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this inber (if known). Answer every question.				r supplying correct		
Par							
1.	Is this a joint case?						
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?						
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Housel	<i>hold</i> of Deb	tor 2.			
2.	Do you have dependents? ☐ No						
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?		
	Do not state the				□ No		
	dependents names.	Son		11	Yes		
					□ No		
		Son		14	■ Yes		
					□ No		
					☐ Yes ☐ No		
					☐ Yes		
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes				1 163		
Par	t 2: Estimate Your Ongoing Monthly Expenses						
Est exp	imate your expenses as of your bankruptcy filing date unless y enses as of a date after the bankruptcy is filed. If this is a supp dicable date.	ou are using this fo lemental <i>Schedule</i>	rm as a su J, check th	ipplement in a Cha ne box at the top o	pter 13 case to report f the form and fill in the		
the	lude expenses paid for with non-cash government assistance it value of such assistance and have included it on <i>Schedule I:</i> Yficial Form 106I.)			Your exp	enses		
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$	S	1,050.00		
	If not included in line 4:						
	4a. Real estate taxes		4a. \$	5	0.00		
	4b. Property, homeowner's, or renter's insurance		4b. \$	·	0.00		
	4c. Home maintenance, repair, and upkeep expenses		4c. \$	S	0.00		
	4d. Homeowner's association or condominium dues		4d. \$	§	0.00		

0.00

5. Additional mortgage payments for your residence, such as home equity loans

Debtor 1	Jeanette	Castro	Case number (if known	Case number (if known)				
6. Util	ities:							
6a.	Electricity,	heat, natural gas	6a. \$	180.00				
6b.	Water, sev	ver, garbage collection	6b. \$	140.00				
6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c. \$	210.00				
6d.	Other. Spe	ecify:	6d. \$	0.00				
7. Fo c		ekeeping supplies	7. \$	800.00				
		hildren's education costs	8. \$	35.00				
		ry, and dry cleaning	9. \$	55.00				
		roducts and services	10. \$	75.00				
	•	ntal expenses	11. \$	55.00				
		Include gas, maintenance, bus or train fare.	🗸					
	not include ca	•	12. \$	125.00				
		clubs, recreation, newspapers, magazines, and book	s 13. \$	45.00				
		ributions and religious donations	14. \$	25.00				
15. Ins			· · · · · · · · · · · · · · · · · · ·					
		surance deducted from your pay or included in lines 4 or	20.					
	. Life insura		15a. \$	0.00				
15b	. Health ins	urance	15b. \$	0.00				
15c	. Vehicle ins	surance	15c. \$	111.00				
		rance. Specify: Renters Insurance	15d. \$	25.00				
		clude taxes deducted from your pay or included in lines 4						
	ecify:	order taxes deducted from your pay or included in lines	16. \$	0.00				
17. Ins t	tallment or le	ease payments:						
17a	. Car payme	ents for Vehicle 1	17a. \$	0.00				
17b	. Car payme	ents for Vehicle 2	17b. \$	0.00				
	. Other. Spe		17c. \$	0.00				
	l. Other. Spe	-	17d. \$	0.00				
		of alimony, maintenance, and support that you did no	ot report as					
		your pay on line 5, Schedule I, Your Income (Official I		0.00				
19. Oth	er payments	s you make to support others who do not live with yo	u. \$	0.00				
Spe	ecify:		19.					
		erty expenses not included in lines 4 or 5 of this form	or on Schedule I: Your Income) <u>.</u>				
20a	 Mortgages 	on other property	20a. \$	0.00				
20b	 Real estate 	e taxes	20b. \$	0.00				
20c	. Property, h	nomeowner's, or renter's insurance	20c. \$	0.00				
20d	l. Maintenan	ce, repair, and upkeep expenses	20d. \$	0.00				
20e	. Homeown	er's association or condominium dues	20e. \$	0.00				
21. Oth	er: Specify:		21. +\$	0.00				
		·						
	•	nonthly expenses						
	. Add lines 4	•	\$	2,931.00				
22b	. Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Fo	orm 106J-2 \$					
22c	. Add line 22a	a and 22b. The result is your monthly expenses.	\$	2,931.00				
22 6-1	oulato vous s	monthly not income						
	•	monthly net income.	222 \$	0.000.00				
		12 (your combined monthly income) from Schedule I.	23a. \$	2,330.68				
23b	. Copy your	monthly expenses from line 22c above.	23b\$	2,931.00				
22^	Cubtroot	our monthly expenses from your monthly income						
230		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c. \$	-600.32				
	THE TESUIL	is your monuny net income.	200. [+					
24. Do	you expect a	an increase or decrease in your expenses within the	ear after you file this form?					
For	example, do yo	ou expect to finish paying for your car loan within the year or do yo		ncrease or decrease because of a				
mod	lification to the	terms of your mortgage?						
■ 1	No.							
Пν	Yes.	Explain here:						

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Fill in this i	nformation to identify your						
	nformation to identify your	case:					
Debtor 1	Jeanette Castro	Middle Nesse		Loot Nome			
Dahtar 0	FIRST Name	Middle Name		Last Name			
Debtor 2 (Spouse if, filing	j) First Name	Middle Name		Last Name			
United State	es Bankruptcy Court for the:	NORTHERN DISTR	RICT OF ILI	LINOIS			
Case numbe	۵r						
(if known)							heck if this is an mended filing
	Form 106Dec ration About a	n Individu	ıal Da	htor's S	Schadulas		40145
Decia	alion About a	iii iiiaiviaa	iai De	טנטו א	<u>Scriedules</u>		12/15
obtaining m	e this form whenever you fi oney or property by fraud in th. 18 U.S.C. §§ 152, 1341, 1	n connection with a					
Did yo	u pay or agree to pay some	one who is NOT an a	attorney to	help you fill o	ut bankruptcy forms	?	
■ N	0						
□ Y	es. Name of person						on Preparer's Notice, ure (Official Form 119)
	penalty of perjury, I declare by are true and correct.	that I have read the	summary a	and schedules	filed with this decla	ration and	
X /s/	Jeanette Castro			X			
Je	anette Castro Inature of Debtor 1			Signature	e of Debtor 2		

Date _____

Date March 15, 2017

Fill in th	is information to identify you	r case:						
Debtor 1	Jeanette Castro							
	First Name	Middle Name	Last Name					
Debtor 2 (Spouse if,		Middle Name	Last Name					
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS					
Case nui	mber				heck if this is an mended filing			
State Be as con informati	ment of Financial mplete and accurate as poss on. If more space is needed, if known). Answer every que	ible. If two married people a attach a separate sheet to t	re filing together, both are	equally responsible for sup				
Part 1:	·	arital Status and Where You	Lived Before					
1. Wha	at is your current marital statu							
□	Married Not married							
2. Duri	ng the last 3 years, have you	lived anywhere other than v	vhere you live now?					
	Ma							
_	No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
Dek	otor 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
	nin the last 8 years, did you end territories include Arizona, Ca							
	No Yes. Make sure you fill out Sci	hedule H: Your Codebtors (Off	ficial Form 106H).					
Part 2	Explain the Sources of You	ır Income						
Fill in	you have any income from er n the total amount of income you u are filing a joint case and you	u received from all jobs and a	II businesses, including part-	time activities.	ndar years?			
■	No Yes. Fill in the details.							
		Debtor 1		Debtor 2				
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
	nuary 1 of current year until you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$5,805.20	☐ Wages, commissions, bonuses, tips				

Operating a business

☐ Operating a business

Page 36 of 55 Case number (if known) Document Debtor 1 Jeanette Castro

					Debtor 1			Debtor 2			
	For last calendar year: Wag		Sources of income Check all that apply.	(befo	re deductions and sions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)			
			■ Wages, commissions, bonuses, tips		\$26,492.00	☐ Wages, com bonuses, tips	missions,				
					☐ Operating a business			☐ Operating a	business		
/ lanuary 1 to December 31 7015)		■ Wages, commissions, bonuses, tips		\$23,619.00	☐ Wages, com bonuses, tips	missions,					
					☐ Operating a business			Operating a	business		
	the cal			31, 2014)	■ Wages, commissions, bonuses, tips		\$41,876.00	☐ Wages, combonuses, tips	missions,		
					☐ Operating a business	rating a business			☐ Operating a business		
	List eac	ch so		the gross inco	se and you have income that y		-	that you listed in lin			
					Debtor 1 Sources of income Describe below.	each (befo	s income from source re deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)	
Par	t 3:	List C	ertain Pa	yments You	Made Before You Filed for E	3ankru _l	otcy				
6.	Are eit □ N	o. N	leither Dendividual	ebtor 1 nor I primarily for a	's debts primarily consumer Debtor 2 has primarily consu a personal, family, or househole ore you filed for bankruptcy, did	mer de d purpo	bts. Consumer debi se."			1(8) as "incurred by an	
			□ _{No.}	Go to line 7	7.						
			□ Yes * Subject	paid that cr not include	each creditor to whom you paid editor. Do not include paymen payments to an attorney for the t on 4/01/19 and every 3 years	ts for do	omestic support obliq ruptcy case.	gations, such as ch	nild support a	ınd alimony. Also, do	
	■ Ye				or both have primarily consu			al of \$600 or more?	,		
			No.	Go to line 7	7.						
			□ _{Yes}	include pay	each creditor to whom you paid rments for domestic support ob r this bankruptcy case.						
	Credit	tor's	Name an	d Address	Dates of paymen	nt	Total amount paid	Amount you still owe	Was this p	payment for	

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Page 37 of 55 Document ase number (*if known*) Debtor 1 **Jeanette Castro** Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and No ☐ Yes. List all payments to an insider. **Insider's Name and Address Dates of payment** Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe Include creditor's name Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number **Portfolio Recovery Associates** Civil **Cook County Clerk** Pending 2121 Euclid Ave VS □ On appeal Rolling Meadows, IL 60008 Jeanette Castro □ Concluded 16 M3 1128 Midland Credit Managemet Civil **Cook County Clerk** Pending 2121 Euclid Ave □ On appeal Jeanette Castro Rolling Meadows, IL 60008 □ Concluded 15 M3 447 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ☐ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property **Explain what happened VW Credit** 2012 VW Beetle 2014

1401 Franklin Blvd. Libertyville, IL 60048

☐ Property was attached, seized or levied.

Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished.

\$19,217.00

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Page 38 of 55 Case number (if known) Debtor 1 Jeanette Castro 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You \$1000 - Attorney Fees 03/01/17 \$1,335.00 James Young Law

85 Market Street

Elgin, IL 60123

\$335 - Filing Fee

ase number (*if known*)

Debtor 1 **Jeanette Castro**

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No П Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No П Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold. before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? п Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No ☐ Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code)

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Debtor 1 Jeanette Castro

Par	t 9:	Identify Property You Hold or Control for S	Someone Else					
23.		you hold or control any property that someo someone.	ne else owns? Include any prope	rty y	ou borrowed from, are storing fo	r, or hold in trust		
		No Yes. Fill in the details.						
		rner's Name dress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value		
Par	t 10:	Give Details About Environmental Informa	ation					
For	the p	ourpose of Part 10, the following definitions	apply:					
	toxi	rironmental law means any federal, state, or c substances, wastes, or material into the ai ulations controlling the cleanup of these sub	r, land, soil, surface water, groun	-	• • • • • • • • • • • • • • • • • • • •			
		means any location, facility, or property as wn, operate, or utilize it, including disposal		law	, whether you now own, operate,	or utilize it or used		
		<i>ardous material</i> means anything an environi ardous material, pollutant, contaminant, or s		s wa	aste, hazardous substance, toxic s	substance,		
Rep	ort a	II notices, releases, and proceedings that yo	ou know about, regardless of whe	n th	ey occurred.			
24.	Has	any governmental unit notified you that you	ı may be liable or potentially liable	e un	der or in violation of an environm	ental law?		
		No						
		Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice		
25.	Hav	e you notified any governmental unit of any	release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice		
26.	Hav	e you been a party in any judicial or adminis	strative proceeding under any env	riron	mental law? Include settlements	and orders.		
		No						
		Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case		
Par	t 11:	Give Details About Your Business or Con	nections to Any Business					
27.	Witl	nin 4 years before you filed for bankruptcy, c	lid vou own a business or have a	nv o	of the following connections to any	v business?		
		☐ A sole proprietor or self-employed in a t	•	-	-	, adomese .		
		☐ A member of a limited liability company			•			
		☐ A partner in a partnership	(===) or mining harmond		 ,			
		☐ An officer, director, or managing executive of a corporation						

☐ An owner of at least 5% of the voting or equity securities of a corporation

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	■ No. None of the above applies. Go to F	Part 12.	
	☐ Yes. Check all that apply above and fill	in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to an	yone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	12: Sign Below		
are t with 18 U	rue and correct. I understand that making a a bankruptcy case can result in fines up to \$.S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, or ol	leclare under penalty of perjury that the answers otaining money or property by fraud in connection rs, or both.
Jea	Jeanette Castro nette Castro nature of Debtor 1	Signature of Debtor 2	
Date	March 15, 2017	Date	
Did y ■ N □ Y	_	ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
Did y	ou pay or agree to pay someone who is not	an attorney to help you fill out bankruptcy	forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Debtor 1

■ No

Jeanette Castro

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Debtor 1	Jeanette Castro				
	First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
case number _				-	neck if this is an

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Jeanette Castro Case number (if known)

name: Description of property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes
in the information below. Do not list real estate	erty Leases It you listed in Schedule G: Executory Contracts and Une Be leases. Unexpired leases are leases that are still in effect Berty lease if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.
Describe your unexpired personal property le	ases	Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Part 3: Sign Below Under penalty of perjury, I declare that I have i property that is subject to an unexpired lease.	ndicated my intention about any property of my estate th	nat secures a debt and any personal
X /s/ Jeanette Castro	X	
Jeanette Castro Signature of Debtor 1	Signature of Debtor 2	
Date March 15, 2017	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-08143 Doc 1 Filed 03/15/17 Entered 03/15/17 16:11:45 Desc Main Document Page 48 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	e Jeanette Castro		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPI	ENSATION OF ATTOR	NEY FOR DE	CBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy, of	or agreed to be paid	to me, for services rend	ered or to
	For legal services, I have agreed to accept		\$	1,000.00	
	Prior to the filing of this statement I have received	d	\$	1,000.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com	npensation with any other person u	inless they are mem	pers and associates of m	ıy law firm.
	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n				firm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	a. Analysis of the debtor's financial situation, and renb. Preparation and filing of any petition, schedules, stc. Representation of the debtor at the meeting of credd. [Other provisions as needed]	atement of affairs and plan which	may be required;		otcy;
	Negotiations with secured creditors to reaffirmation agreements and applicat 522(f)(2)(A) for avoidance of liens on h	ions as needed; preparation			
5.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding.			es, relief from stay a	ctions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	any agreement or arrangement for p	payment to me for re	epresentation of the deb	tor(s) in
N	March 15, 2017	/s/ James A. Youn	g		
I	Date	James A. Young 6 Signature of Attorney			
		James A. Young L			
		85 Market Street			
		Elgin, IL 60123 847-793-1031			
		sarai@jamesyoun	glaw.com		
		Name of law firm			

ENGAGEMENT FOR LEGAL SERVICES – CHAPTER 7 BANKRUPTCY

This Engagement for Legal Services, hereafter referred to as "Agreement", is hereby entered into by and between the law firm of James A. Young, herein after referred to collectively as "Counsel", and Client in connection with Counsel's representation of Client in a Chapter 7 Bankruptcy. Pursuant to this Agreement, Counsel and Client agree to as follows:

- 1. Retainer for Legal Services. The minimum amount that will be charged for this engagement will be \$1000 ("Retainer"). The retainer paid by Client is considered an advance payment retainer, which means that once paid, the retainer becomes property of Counsel and will not be deposited into a client trust account, but rather into Counsel's general account. Client agrees and understands that the Advance Payment Retainer is non-refundable once paid due to Counsel's inability to accept other engagements which might conflict with our representation of you. Client has the right to request that the retainer be held in a client trust account as a security retainer allowing Counsel to bill at Counsel's hourly rate of \$275.00 per hour against said retainer. However if such retainer is requested, Counsel must decline the engagement for practical reasons including the potential accessibility of the security retainer by Client's creditors and increased staff and bookkeeping time required to properly administer a security retainer. This retainer does not cover representation of Client in any Adversary Proceedings that may be filed against Client by any creditors or the Bankruptcy Trustee. A separate Retainer will be required.
- 2. Additional Costs and Expenses. In addition to the retainer described above, Client is responsible for the court filing fee in the amount of \$335.00. The retainer described above does not cover the court filing fee and additional costs and expenses relating to the representation of Client by Counsel. Client agrees that he or she is responsible for any and all additional costs and expenses, which may include expenses for postage, photocopies, other professional fees, expert witness fees, credit counseling fees, credit report fees, etc. In the event that Counsel advances any amount towards payments of any additional costs and expenses, Client agrees to reimburse Counsel for said costs and expenses within fifteen (15) days from the date notified by Counsel of said advancement of costs and expenses.
- 3. Payment of Retainer and Court Filing Fee. Client understands that the Chapter 7 Bankruptcy Case will not be filed with the U.S. Bankruptcy Court until such time that the Retainer and Court Filing Fee are paid in full.
- 4. Additional Fees. This retainer does not cover any legal fees for legal services beyond the preparation of the bankruptcy petition and schedules and attendance of the First Meeting of Creditors. In the event that Counsel is required to appear at any continued First Meeting of Creditors or is required to appear in court to defend against or present any motions on Client's behalf, Client understands that Counsel reserves the right to bill Client for the additional time expended at his hourly rate of \$275.00 per hour. Client agrees to pay Counsel for said additional time expended within fifteen (15) days from the date notified by Counsel of said additional time expended.
- 5. <u>Clients Obligations.</u> The Client's obligations are as follows:
 - a. To promptly pay all legal fees, charges and the court filing fee.
 - b. To provide Counsel with all requested documents, bills, statements, payment advices, bank records, tax returns, tax bills, appraisals, retirement and savings accounts, income information and to sign any and all necessary forms to allow Counsel to secure such documentation.
 - c. To provide accurately and honestly for all of the information necessary to prepare and file the Chapter 7 Bankruptcy case and other motions or proceedings arising during the course of the case.
 - d. To timely respond to all letters, emails and telephone calls from Counsel or any member of his staff.
 - e. To keep Counsel advised at all times of the Client's mailing and physical addresses, telephone numbers and email addresses.
 - f. To appear at the first meeting of creditors (341 Meeting) and at any other court hearings or meetings as may be required by the Court or any other party.
 - g. To keep all scheduled office appointments with Counsel and to notify Counsel in advance of any problems with the timing and scheduling of such appointments
 - h. To contact Counsel by telephone with the understanding that Counsel is only able to return calls between the hours of 9:00 a.m. and 5:00 p.m. If Counsel is available when the call is received, then the call will be taken at that time. However, if you have to leave a message for Counsel then you must provide a number that you can be reached at during the designated times. Counsel or Legal Assistant

- will make every effort to return all such telephone calls within 24 hours, excluding weekends and holidays.
- To provide any information requested of the Client by the Chapter 7 Trustee, the Bankruptcy Administrator or any other party in the case, unless the Court rules that the Client is not required to provide such information.
- j. To respond as soon as possible to any requests made by the Counsel to get copies of income tax returns from the respective taxing agencies for a period of two (2) years prior to the filing of your bankruptcy case.
- k. To sign a tax authorization form to authorize Counsel to get copies of income tax returns from the respective taxing agencies for a period of two (2) years prior to the filing of your bankruptcy case.
- I. To provide current bank account information to include monthly statements as requested and online account balances as of the date of the signing of your bankruptcy petition packet.
- 6. Attorney Withdrawal from a Chapter7 case, Adversary Proceeding or Contested Matter. Pursuant to the Local Rules of the Bankruptcy Court, Counsel shall remain the responsible attorney of record for the Client in all matters in the case until the case is closed, dismissed or the discharge is entered or until the Attorney is relieved from such representation by order of the Court. The parties agree that just reasons for Counsel to withdraw from the representation of the Client, include but are not limited to the following:
 - a. The failure of the Client to provide complete, truthful and accurate information to Counsel.
 - b. The failure of the Client to comply with the Client's obligations as provided for in this Agreement and in the Local Rules.
 - c. The failure of the Client to comply with any of the obligations imposed on the Client by the Bankruptcy Code and Bankruptcy Rules.
 - d. The failure or refusal of the Client to comply with the Client's obligations to provide any supplemental information to the Court or to the Chapter 7 Trustee or to correct any incorrect or incomplete information previously provided to the Court or to the Trustee.
 - e. The failure of the Client to pay for all legal fees and costs.
 - f. If the Client are husband and wife, then any separation, serious domestic dispute or divorce of the parties.
 - g. Any irreconcilable conflict between Counsel and Client with respect to the case.
- 7. Non-Dischargeability of Certain Debts. I have been advised that some debts are **NOT** discharged by a Chapter 7 Bankruptcy. I understand that some of the debts that are not dischargeable are
 - Certain Tax debts and other debts or fines owed to governmental units, including parking tickets.
 - 2. Debts incurred by fraudulent means, including but not limited to, recent cash advances or other recent usage.
 - Accidents while driving under the influence of drugs and/or alcohol.
 - 4. Alimony and Child Support.
 - 5. Judgement liens and liens on property.
 - 6. Intentional torts.
 - 7. Credit card charges used to pay State or Federal Taxes.
 - 8. Student Loans owed to the government and non-governmental agencies, and
 - 9. Home Owners' or Condominium Association Dues.
- 8. <u>Scope of Services.</u> Client understands that Counsel has been hired to represent Client in his/her/their bankruptcy case only. Bankruptcy provides relief from debt, and as such Client understands that Counsel **HAS NOT** been hired to negotiate settlement agreements with Client's creditors or to repair Client's credit. Client agrees to be responsible for insuring the accuracy of his/her/their own credit report/history.
- 9. Representations. Every effort will be made to handle your case promptly and efficiently according to the highest legal and ethical standards. There have been no representations or guarantees made by Counsel regarding the outcome of the matter. Any discussion in this regard, past or present, are limited only to estimates based upon Counsel's experience and judgement, but in no event should be considered as a representation, promise or guarantee as to the result which might be obtainable.
- 10. <u>Severability.</u> If any clause, phrase, provision or portion of this Agreement or the application thereof to any person or circumstance shall be invalid or unenforceable under applicable law, such invalidity or unenforceability shall not

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affect, impair or render invalid or unenforceable the remainder of this Agreement nor any other clause, phrase, provision or portion hereof.

11. Law Governing and Jurisdiction. This Agreement shall be interpreted in accordance with the laws of the State of Illinois and the parties irrevocably consent to the exclusive jurisdiction and venue of the Circuit Court of Kane County, Illinois located in Geneva, Illinois in connection with any action or proceeding arising out of or relating to this Agreement.

Client has been informed and fully understands the following restrictions regarding receiving a discharge in another bankruptcy once Client receives a discharge in this bankruptcy:

- a. A Chapter 7 Client may not be granted a discharge if a discharge was received under Chapter 7 in a case filed within eight (8) years of the filing of a Chapter 7 petition. (Eight years between Chapter 7 discharges).
- b. A Chapter 13 Client may not be granted a discharge if he/she/they received a discharge in a previous Chapter 7, 11 or 12 filed within four (4) years of the filing of a Chapter 13. (Four years between Chapter 7 and then a Chapter 13 discharge.)

AGREED TO BY: Client	03/0//17 Date
Client	Date
Counsel	31117 Date

Date

James A. Young Law, LLC. 85 Market Street Elgin, IL 60123 (847) 608-9526

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United States Bankruptcy Court Northern District of Illinois

		Northern District of Inniois		
In re	Jeanette Castro		Case No.	
		Debtor(s)	Chapter 7	
	V	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	26
	The above-named Debtor(sour) knowledge.	s) hereby verifies that the list of credit	tors is true and co	rrect to the best of my

Best Buy PO BOX 6497 Sioux Falls, SD 57117

Chase PO BOX 15298 Wilmington, DE 19850

Citibank c/o Midland Credit Management PO BOX 2129 Warren, MI 48090

Citibank c/o Midland Funding 2365 Northside Dr. Suite 300 San Diego, CA 92123

James G. Loeser, DDS, MD, PC 1580 N. Northwest Highway #300 Park Ridge, IL 60068

James G. Loeser, DDS, MD, PC 1580 N. Northwest Highway #300 Park Ridge, IL 60068

Kohls c/o Credit Control LLC 5757 Phantom Dr, Suite 330 Hazelwood, MO 63042

Northwest Community Hospital c/o Miramed Revenue Group 991 Oak Creek Dr. Lombard, IL 60148

Northwest Community Hospital 25709 Network Place Chicago, IL 60673

Northwest Community Hospital c/o Harris & Harris, LTD 111 W Jackson Blvd, Suite 400 Chicago, IL 60604 Northwest Radiology Specialists LLC c/o Medical Recovery Specialists 2250 E. Devon Ave, Suite 352 Des Plaines, IL 60018

Old Navy PO BOX 965005 Orlando, FL 32896

Oral Facial Implant Special c/o Tek Collect PO BOX 1269 Columbus, OH 43216

Orthopedic Associates, SC 415 W. Golf Rd., Suite 68 Arlington Heights, IL 60005

Pediatric Assoc. of Arlington Hts 880 W. Central Rd. Suite 4200 Arlington Heights, IL 60005

Portfoliio Recovery Associates, LLC c/o Blatt Hasenmiller Liebker & Moo 10 S. LaSalle Street, Suite 2200 Chicago, IL 60603

Quest Diagnostics PO BOX 740397 Cincinnati, OH 45274

Sears c/o Midland Credit Management 2365 Northside Dr, Suite 300 San Diego, CA 92108

Sprint c/o ERC PO BOX 23870 Jacksonville, FL 32241

Superior Air Ground Ambulance c/o Medical Recovery Specialists LL 2250 E. Devon Ave. #352 Des Plaines, IL 60018 Superior Ambulance Service c/o DSG Collect 2250 E. Devon Ave, Suite 352 Des Plaines, IL 60018

Synchrony Bank c/o Portfolio Recovery 120 Corporate Blvd Norfolk, VA 23502

Target c/o ERC PO BOX 23870 Jacksonville, FL 32241

The Pediatric Faculty Foundation PO BOX 4051 Carol Stream, IL 60197

VW Credit c/o AFNI PO BOX 3517 Bloomington, IL 61702

Wells Fargo PO BOX 31557 Billings, MT 59107